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CONFIRMATION NO. 5520

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | | |
|---|---|--|--|---------------------------------|---------------------|---------------------------|
| 09/998,346 | 11/30/2001 | 607 | 1654 | 830004-2001.2 | | |
| RULE | | | | | | |
| APPLICANTS Irwin Klein, Manhasset, NY; Kaie Ojamaa, Glen Cove, NY; Leo Rubin, Suffern, NY; | | | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/257,666 12/21/2000 | | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 01/09/2002 | | | | | | |
| Foreign Priority claimed | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | NY | 21 | 40 | 1 |
| Verified and | /ABDEL A MOHAMED/ | Initials | | | | |
| Acknowledged | Examiner's Signature | | | | | |
| ADDRESS Resuscitation Technologies LLC 11755 Wilshie Blvd. Suite 2000 Los Angeles, CA 90025 UNITED STATES | | | | | | |
| TITLE Compositions of stable T3 and methodes of use thereof | | | | | | |
| FILING FEE RECEIVED 680 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees | | | |
| | | | <input type="checkbox"/> 1.16 Fees (Filing) | | | |
| | | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | | | |
| | | | <input type="checkbox"/> 1.18 Fees (Issue) | | | |
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